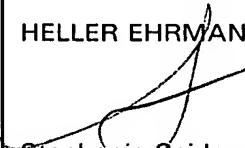


**TRANSMITTAL OF
UTILITY
APPLICATION
UNDER 37
C.F.R. §1.53**

Attorney Docket No.	25885-1755
Customer No.	24961
First Named Inventor	AULT-RICHE <i>et al.</i>
Express Mail Label No.	EL 964455809 US
Date of Mailing	October 30, 2003

U.S. PTO
10/699113
03945
10/699113
103003

Application Elements	Accompanying Application Papers
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form</p> <p>2. <input checked="" type="checkbox"/> Specification containing <u>260</u> pages (including claims and Abstract).</p> <p>a. Title: SELF-ASSEMBLING ARRAYS AND USES THEREOF</p> <p>b. Number of claims: <u>247</u></p> <p>3. <input checked="" type="checkbox"/> <u>23</u> sheets of drawings with <u>20</u> Figure(s).</p> <p>4. <input type="checkbox"/> Unexecuted Declaration listing name of inventor(s).</p> <p>5. <input checked="" type="checkbox"/> Sequence Listing:</p> <p><input checked="" type="checkbox"/> Paper copy - 194 pages (identical to computer copy)</p> <p><input checked="" type="checkbox"/> Computer readable copy</p> <p><input checked="" type="checkbox"/> Verified Statement</p>	<p>6. <input type="checkbox"/> Copy of Assignments from prior application</p> <p>7. <input checked="" type="checkbox"/> Small Entity Status is claimed</p> <p>8. <input type="checkbox"/> Preliminary Amendment</p> <p>9. <input checked="" type="checkbox"/> Return Receipt Postcard</p>
<p>SIGNATURE OF ATTORNEY/AGENT</p> <p>HELLER EHRLMAN WHITE & McAULIFFE LLP</p>  <p>Stephanie Seidman Registration Number: 33,779</p>	

Benefit of priority under 35 U.S.C. Section 119(e) is claimed to U.S. Provisional Application Serial NO. 60/446,687, filed February 10, 2003. The subject matter thereof is incorporated by in its entirety by reference thereto.

CORRESPONDENCE ADDRESS	
NAME	Stephanie Seidman Registration No. 33,779 Heller Ehrman White & McAuliffe LLP
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**FEE TRANSMITTAL
ACCOMPANYING UTILITY
APPLICATION UNDER
37 C.F.R. §1.53**

Attorney Docket No.	25885-1755
Customer No.	24961
First Named Inventor	AULT-RICHE <i>et al.</i>
Express Mail Label No.	EL 964455809 US
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FEE CALCULATION FOR CLAIMS AS AMENDED

a) Basic Fee	\$ 770.00
b) Independent Claims $\frac{17}{17} - 3 = \frac{14}{14} \times \$ 86.00$	\$ 1204.00
c) Total Claims $\frac{264}{264} - 20 = \frac{244}{244} \times \$ 18.00$	\$ 4392.00
d) Fee for Multiple Dependent Claims- \$290.00	\$.00

TOTAL FILING FEE **\$ 6366.00**

[X] Status as Small Entity is claimed, reducing Fee by one-half to **\$ 3183.00**.

[X] A check in the amount of **\$3,183.00** to cover the fee for filing the application.

[] Charge **\$.00** to Deposit Account No. 50-1213.

[X] The Commissioner is hereby authorized to charge any fees, including the filing fee and excess claims fee, that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

CORRESPONDENCE ADDRESS

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Address	4350 La Jolla Village Drive, 7th Floor, San Diego, CA 92122-1246		
	Telephone: (858) 450-8403		Facsimile: (858) 587-5360
Submitted by:			
Typed or printed name	Stephanie Seidman	Reg. Number	33,779
Signature		Date	10/30/03
		Deposit Account	50-1213